

Cartwright (Saml. A.)

[on Cholera]







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Cartwright M. (S. A.)

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### Dr. Cartwright on Cholera.

The following has been sent to us by a highly respectable citizen, as embodying some of the best hints and suggestions in relation to the cholera that have yet been made. The authority too, is of the very highest character. Our own advice is, to obtain the aid of a physician as speedily as possible in case of sickness.

NEW ORLEANS, May 14, 1849.

Your favor of the 27th of April has just been received. In reply to your inquiries, whether the symptoms of the present Cholera agree with those of 1833, I answer, they do. The disease is the same—the same symptoms, and the same variety of symptoms observed in the epidemic of '32 and '33, are found in the present. The symptoms vary in different places and often in the same family—some have cramps, others not. Most of the cases commence by diarrhoea, and a few by vomiting and diarrhoea at the same time; some, rapid in their progress, others slow. In general, there is no feeling of indisposition when the diarrhoea begins.

It is only after the system has been robbed of much of its watery fluids by the diarrhoea, that the sinking sensation commences—just as in loss of blood. The patient is thus lulled into a fatal security, because he does not feel sick, and thinks that he has only premonitory symptoms, which may end in cholera or not. The error lies in taking it for granted that the disease has premonitory symptoms, requiring a milder or different treatment from the disease itself.

The disease consists in a *pouring back* of the contents of the absorbent vessels into the alimentary canal, and a filtering of the watery parts of the blood from the extremities of the capillary arteries. Before the diarrhoea manifests itself, the disease has begun. The absorbents or some of them have poured back their contents, furnishing the serous or rice water matter that is thrown out by the diarrhoea. How erroneous then, to call the diarrhoea a premonitory symptom, when it is actually a secondary effect of a prior diseased action, of the disease itself.

To cure the cholera *cito, tuto et jucunde*, this pouring back process must be arrested. Astringents, opiates, stimulants, &c., may check it for a while, and nature may re-establish the natural course of the circulation in the absorbents; but there is no security that she will do so, unless the fluids be determined to the skin and the liver put to work. When we act on the skin by inducing perspiration, we make the absorbents of the alimentary canal, hungry for fluids. A *sucking up* instead of a *pouring back* action is established in them. The disease consists in the latter action, and is cured at once by establishing the former. Fluids in the body or out of it cannot run in opposite directions at the same time. Hence a diarrhoea from a retrograde action of the absorbents must stop as a matter of necessity, when the natural course of the circulation in the absorbent vessels is restored by inducing perspiration. The perspiration should be supported by diluent drinks, until we have time to bring the liver into play.



The liver is torpid in Cholera. When the liver acts the natural course of the abdominal circulation is restored. But until the abdominal circulation through the liver is restored, we must act on the skin. We cannot act on the liver and restore the natural course of the circulation of blood through it, under six or eight hours. The disease often kills in three or four. But we can act on the skin in five minutes, which will answer every purpose, and give us time to act on the liver. How can we act on the skin and actually cure the formidable cholera in so short time, is the question. I answer, that by a stimulating sudorific cholagogue formed upon the basis of the celebrated composition of ancients, which the experience of two thousand years has proved to be eminently successful in cold congestive affections—a composition where the pungent aromatics, anti-spasmodics and slow purgatives, are brought into happy union.

My composition differs from the ancient preparation, in having only one kind of pepper instead of three, one anti-spasmodic, the camphor, instead of many, and one slow purgative, the chalk mercury or calomel, instead of the drastic vegetable cathartics used by the ancients. It is composed of 20 grains of chalk mercury (*Hydrrum cum creta*) or English calomel, 20 grains Cayenne pepper, 10 grains gum camphor, 15 grains calcined charcoal, and the same quantity gum arabic. The above united constitute a dose for an adult. It is best given in two table spoonful of cold water. It should be swallowed at once without stopping to taste it. It generally causes a sweat to break out in the stomach, bowels and extremities, with little sips of hot camomile, sage, balm, or mint tea, or chicken water. Then when the sweat commences, all that is necessary is to support the sweat by drinking freely of warm teas or chicken water, until the purgative part of the composition has time to empty the gall bladder of its atrabillious contents, and to enable the blood to circulate through the liver. The heat to assist the above powder in causing sweat, may be applied to the extremities, in the shape of bottles filled with hot water, and to the stomach and bowels, by a jacket or shirt wrung out of scalding water and rolled into a ball as large as a child's head, wrapped in a dry flannel. As soon as the powder is swallowed, a napkin dipped in cold water, should be stuffed into the mouth, to take out the burning taste and to prevent vomiting.

If instead of a sweat a flushing of the face and heat of the skin be caused by the hot applications, the lancet should be used to bring the system down to the sweating point, or a free cupping over the stomach. Drinks should be given while the blood is flowing, to prevent the loss of blood from debilitating, which is well to do, if the drinks be absorbed; blood letting, by removing venous plethora facilitates absorption. A sweat will stop the diarrhoea and vomiting if it can be established. While the diarrhoea goes on, and before perspiration occurs, stimulants may be used freely—none are too strong—fire itself is scarcely too strong, if it could be swallowed. The powders though are generally strong enough. When sweat is once established, stimulants are injurious, and are apt to drive the blood to the brain, and cause secondary fever.

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Warm teas or chicken water are then the best stimulants; they dilute the blood—they can be taken cold or warm or alternated with ice. But suppose the powders cannot be kept on the stomach, what then? I answer, morphine and camphor water. From half a grain to a grain of sulphate of morphine dissolved in a dessert spoonful of camphor water (the aqua camphor of the shops) should be given after every spell of vomiting, or every stool, also a little calomel or chalk mercury. Coffee after the morphine, prevents it from affecting the head.

I have been practising medicine in the city of New Orleans, more than four months, and have seen more or less cholera every day. I have not met with a single case, which has not been promptly cured by the above mentioned means, if taken in hands before the pulse failed. The most of the cases are cured by a single dose. More than one or two doses are seldom necessary. What kills so many people with cholera, they will not believe they have the disease, until they begin to die. They die from trifling with the diarrhoea, believing it is only a premonitory symptom, and stop it or try to do so by astringent or opiates. Life is suspended by a hair under the "stopping up" empirical method. A fearful risk has to be run. But if the skin and liver be made to act, there is little or no risk or danger to be apprehended. Many die from stimulating too much after the sweat begins to flow, and not taking sufficient fluid restore the watery part of the blood which has been lost. The word "premonitory" has killed its thousands. The disease has no premonitory symptoms that I have ever discovered. What is called by that name is the disease itself.

The above mentioned powders, and a vial of the morphine and camphor drops, should be kept in every house when the cholera is about, and taken whenever and wherever the first symptoms of the disease show itself. In cholera, "Take the medicine first and send for the Doctor afterwards."

Respectfully yours, &c.,

SAML. A. CARTWRIGHT, late of Natchez.

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